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From: Doyle, Brendan
Sent: Mon 3/10/2014 2:44:01 PM
Subject: Chem incident in Charleston WVA: WLA mentioned in the article

While the draft Chem Clean-up Decision Making Guidance may not be applicable in responding to this incident, it's interesting to me to see how other aspects of our work such as strengthening and expanding WLA and ERLN capabilities help to also strengthen community resiliency in places like Charleston, WVA.

Brendan

West Virginia's Spill and the Importance of Laboratories

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By Megan Weil Latshaw, Director, [Environmental Health Programs](#)

Living in the United States usually means we can [expect clean water](#) every time we turn on our tap.^[1] But for over a week, hundreds of thousands of West Virginians were unable to use their water for drinking, bathing, showering or even brushing their teeth.^[2]

The recent Elk River story led to many questions about chemicals policy in the US. For example, the New York Times called into question [WV's regulatory framework](#) and National Public Radio discussed the lack of [oversight of chemical storage facilities](#). It also drew attention to our lack of knowledge about these chemicals:

- Deborah Blum, a Pulitzer-Prize winning writer, highlighted how little we know about [chemicals in commerce](#).
- The Director of the US Centers for Disease Control & Prevention (CDC) pointed out how little they knew about the [original chemical of concern](#), 4-methylcyclohexanemethanol or MCHM.

But despite all the news around the spill, few articles mentioned the role of laboratories. The West Virginia Public Health Laboratory was one of the labs that stepped up to handle the surge in water samples. Environmental chemists worked around the clock and chemists from other parts of the laboratory were pulled in help. They adapted a CDC method that allowed them to report results three times faster than the other responding laboratories. The end is not quite yet in sight: the lab continues testing tap water samples due to concerns about the lingering odor associated with the chemical.

Here at APHL we're proud of the public health laboratories who have built capability & capacity to detect chemical contaminants, not only in water, but also in people. These **public laboratories, whose sole**

mission is to protect the public's health, are prepared to operate 24/7 in order to do so.

We're also proud of the progress being made by federal agencies to build laboratory networks across the country, able to handle just such emergencies (such as EPA's [Water Laboratory Alliance](#) and the [Laboratory Response Network for Chemical Threats](#) funded by CDC). There still remains a lot of work to be done though:

- Barriers to activating these networks remain. We need additional funding to increase their visibility, broad usefulness & efficiency.
- Neither of these networks provides funding to detect radiological agents.
- Electronic exchange of data between laboratories, crucial during emergencies for prompt decision making, remains highly inefficient.
- Due to funding cuts, laboratories struggle to maintain well-trained personnel and aging equipment.

[1] As NPR recently pointed out though, we only monitor public water supplies for 'known' contaminants. What about all those 'unknowns' like pharmaceuticals or personal care products that get washed down the drain or flushed? APHL called on EPA to work with states on [additional drinking water contaminant monitoring systems](#).

[2] The Wall Street Journal published a [timeline](#) of the spill and response.